I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Attorney Docket No.: 020375-000220US

J.E.

Commissioner for Patents

1 1 2005

D. Box 1450

Alexandria, VA 22313-1450

February 7, 2005

TOWNSEND and TOWNSEND and CREW LLP

Cindy Bennett

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Neofytides, et al.

Application No.: 10/046,654

Filed: October 26, 2001

For: AUTOMATED TRANSFER WITH

STORED VALUE FUND

Confirmation No.: 1069

Examiner: Not yet assigned

Art Unit: 2161

THIRD SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT UNDER 37 CFR §1.97 and §1.98

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The reference cited on attached form PTO/SB/08A is being called to the attention of the Examiner. U.S. patents are not enclosed in accordance with the Patent Office waiver issued August 5, 2003 in the Official Gazette, which states as follows:

The Office hereby waives the requirement under 37 CFR 1.98(a)(2)(i) for submitting a copy of each cited U.S. patent and each U.S. patent application publication for all U.S. national patent applications filed after June 30, 2003 and for all international applications that have entered the national stage under 35 USC 371 after June 30, 2003. See 37 CFR 1.491(b).

Neofytides, et al.

Application No.: 10/046,654

Page 2

It is respectfully requested that the cited reference be expressly considered during the prosecution of this application, and the reference be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

Applicant believes that <u>no fee is required</u> for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

Thomas D. Franklin Reg. No. 43,616

TOWNSEND and TOWNSEND and CREW LLP Two Embarcadero Center, Eighth Floor San Francisco, California 94111-3834

Tel: 303-571-4000 Fax: 303-571-4321

TDF:cmb

60415757 v1

		Ar	oplication Number	10/	046,654	PTO/SB/21 (09-	04)
STW)	TRANSMIT AIP E	Fil	ling Date	Oct	tober 26	5, 2001	
	FORM	To Fin	rst Named Inventor	Ne	ofytides	, Cheryl L.	
1	(cro 1 2	105	t Unit	216	31 ·		
	be used for all correspondence after initial t	2 F	kaminer Name	No	t yet as	signed	
95 78	Number of Pages in This comission	At At	torney Docket Number	020	0375-0	00220US	
	MADE						_
<u> </u>		ENCLO	SURES (Check all tha	t apply	<u>)</u>	0	
1	Fee Transmittal Form	Dra Dra	awing(s)			After Allowance Communication to To	,
	Fee Attached	Lice	ensing-related Papers			Appeal Communication to Board of Appeals and Interferences	
	Amendment/Reply	Pet	tition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
	After Final	1 1 1 -	tition to Convert to a ovisional Application			Proprietary Information	
	Affidavits/declaration(s)	Pov	wer of Attorney, Revocation			Status Letter	
\neg		Chi	ange of Correspondence Add	ress		Other Enclosure(s)	
닉	Extension of Time Request	Ter	minal Disclaimer			(please identify below):	
	Express Abandonment Request	Red	Request for Refund		Return Postcard		
Third Supplemental Information		CD	CD, Number of CD(s)				
	Disclosure Statement		Landscape Table on CD				
	Certified Copy of Priority Document(s)	Remarks		authoriz	zed to ch	narge any additional fees to Deposit	
	Reply to Missing Parts/ Incomplete						
Ш	Application						
	Reply to Missing Parts under 37 CFR 1.52 or 1.53						
	SICNA	ATURE OF	APPLICANT, ATTORN	IEV (DP AGI	ENT	
Firm N	Jame			 1, €	JN AG		
	Townsend and Town	nsend and C	rew LLP				
igna	ture						
Drinto	d name _, / \						

	CERTIFICATE OF TRANSMISSION/	MAILING	
	orrespondence is being deposited with the United States P ssed to: Commissioner for Patents, P.O. Box 1450, Alexand		
Signature	ady only	/	
Typed or printed name	Cindy Bennett	Date	February 7, 2005

Reg. No.

43,616

Date

February 7, 2005

1

Substitute for form 1449B/PTO

Sheet

INFORMATION DISCE STATEMENT BY APPLICANT

(use as many sheets as necessary)

of

Complete if Known				
Application Number	10/046,654			
Filing Date	October 26, 2001			
First Named Inventor	Neofytides, Cheryl L.			
Art Unit	2161			
Examiner Name	Not yet assigned			
Attorney Docket Number	020375-000220US			

U.S. PATENT DOCUMENTS+							
		Document Number					
Examiner Initials*	Cite No. ¹	Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
	AA	US-5,699,528	12-16-1997	Hogan			
	AB	US					
	AC	US-					
	AD	US-					
	AE	US-					
	AF	US-					
	AG	US-					
	AH	US-					
	Al	US-					
	AJ	US-					

FOREIGN PATENT DOCUMENTS									
Examiner Initials*	Cite No. ¹	Foreign Patent Document		Dublication Date	Name of Patentee or	Pages, Columns, Lines, Where Relevant			
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Applicant of Cited Document	Passages or Relevant Figures Appear	T⁵	
	AK								
	AL								
	AM								
	. AN								
	AO								

NON PATENT LITERATURE DOCUMENTS							
Examiner Initials *	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²				
	АР						
	AQ						
	AR						
	AS						
	АТ						

Examiner	Date	
Signature	Considered	

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.